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Hidden in Plain Sight: California's Paid Medi-Cal Caregivers Are Vulnerable

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In 2009, an estimated six million caregivers in California provided care to a family member or friend with a long-term illness or disability.¹ Of these caregivers, a significant number—450,000 persons—were paid for the care they provided. Nearly two-thirds of these paid caregivers, or 290,000, aided a family member or friend receiving Medi-Cal (paid Medi-Cal caregivers).² Many of these paid Medi-Cal caregivers more than likely worked for California's In-Home Supportive Services (IHSS) program. Despite being compensated, paid caregivers—and paid Medi-Cal caregivers in particular—fared much worse on a number of economic security indicators.

Paid Caregivers Economically Insecure

Paid Medi-Cal caregivers had the highest rates of poverty: they were most often at less than 100% of the Federal Poverty Level (FPL) and at near-poverty (100-199% FPL; Exhibit 1). All paid caregivers had the next highest poverty rates, while non-caregivers and unpaid caregivers were more likely to have incomes above 300% FPL.³ Over half of paid Medi-Cal caregivers (57%) and almost half of all paid caregivers (49%) had poverty or near-poverty incomes.

The average monthly income for paid Medi-Cal caregivers was \$1,970, compared to \$4,222 for caregivers who were not paid for the assistance they provided (Exhibit 2). Paid Medi-Cal caregivers averaged 43 hours of care per week, or approximately \$11 per hour, accounting for additional work many caregivers do. The

tenuous economic situation of paid Medi-Cal caregivers with incomes less than 200% FPL is reflected in food insecurity rates that were twice those of unpaid caregivers (31% versus 15.4%). Of those with incomes less than 300% FPL, paid Medi-Cal caregivers were the most likely to depend on food stamps (14.1%). Across all income groups, they were the least likely to own their own home (49.6%).

Paid Medi-Cal Caregiver Work Unstable

Paid Medi-Cal caregivers were the most likely of all groups to be at their job for a short period of time, suggesting a high client turnover. Among paid Medi-Cal caregivers, 15.7% were at their current job for less than one year and only 17.5% had been at their job for more than 10 years. Close to one-third of both unpaid caregivers and employed non-caregivers reported being at the same job for more than 10 years (Exhibit 2).

Job instability is compounded by poor access to health care. Paid Medi-Cal caregivers were almost twice as likely to have no health insurance as non-caregiving adults (30.7% versus 17.8%), and 38% of paid Medi-Cal caregivers used a health clinic or health center as their usual source of care (Exhibit 2). The other groups were more likely to use a doctor's office as their usual source of care. Paid Medi-Cal caregivers were also more likely to delay getting a prescription (17%) or medical care (23%) compared to adult non-caregivers (8% and 13% respectively). Among paid Medi-Cal caregivers whose usual source of care was a clinic, 30% reported delays getting prescriptions and 31% reported delays getting medical care.

Paid Medi-Cal Caregivers At Risk

The demand for paid caregivers will grow rapidly as the population ages. The already



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This publication contains data from the California Health Interview Survey (CHIS), the nation's largest state health survey. Conducted by the UCLA Center for Health Policy Research, CHIS data gives a detailed picture of the health and health care needs of California's large and diverse population. Learn more at: www.chis.ucla.edu



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- 1 Caregivers provide assistance with bathing, taking medications, household chores, transportation, and other activities care recipients can no longer do for themselves.
- 2 In comparison, an estimated 5.7 million California adults were unpaid caregivers and more than 21 million were not engaged in caregiving.
- 3 All paid caregivers include paid Medi-Cal caregivers.

fragile economic circumstances of caregivers are jeopardized by pending and proposed cuts to state programs. These paid Medi-Cal caregivers lack job stability and have limited resources, especially if they should become sick themselves. Reduced funding for programs affecting seniors and caregivers, such as Adult Day Health Care and In Home Supportive Services, will likely add to the burdens already faced by California's paid caregivers.

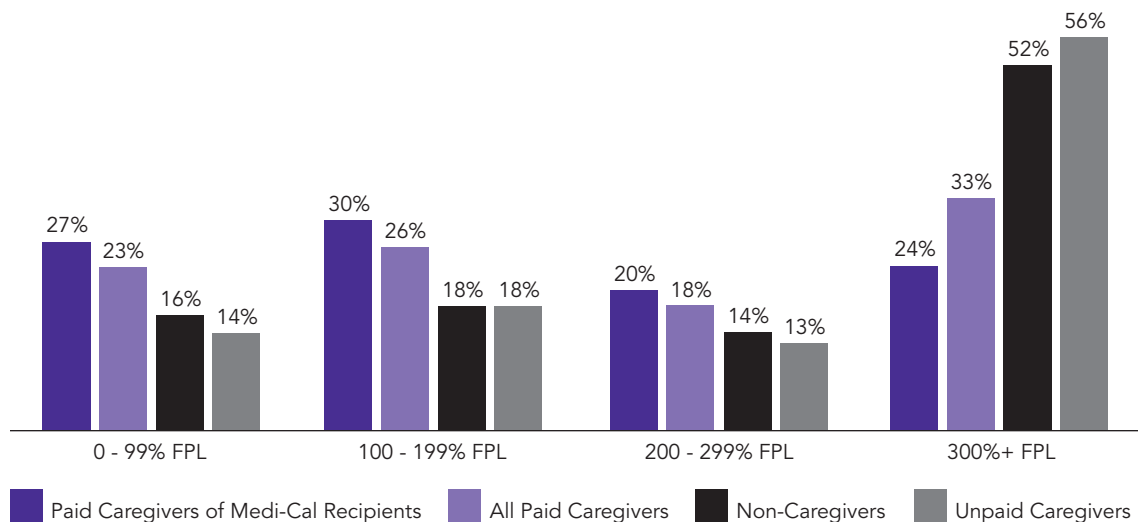
Data Source: 2009 California Health Interview Survey

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Exhibit 1

Federal Poverty Level of Paid/Unpaid Caregivers and Non-Caregivers in California, 2009



Note: The poverty threshold in 2009 was \$10,956 for an individual and \$21,954 for a family of four.

Source: 2009 California Health Interview Survey

Exhibit 2

Economic Characteristics: Paid Caregivers of Medi-Cal Recipients, Unpaid Caregivers and Non-Caregiver Adults in California, 2009

	Paid Caregiver of Medi-Cal Recipient	Unpaid Caregiver	Non-Caregiver
Estimated population (x 1,000)	294	5,719	21,244
Employment	%	%	%
Time at main job			
Less than 1 year	15.7	10.6	8.8
1-9 years	66.8	52.6	59.2
10 or more years	17.5	36.7	32.0
Finances	%	%	%
Respondent's earnings last month (\$)	1,971	4,222	4,127
Food insecurity (if income <200% FPL)	31.0	15.4	13.8
Receive food stamp benefits (if income <300% FPL)	14.1	10.7	9.2
Home Ownership	%	%	%
Own	49.6	64.7	60.3
Rent	46.3	31.1	35.9
Other	3.8	4.2	4.1
Health Services	%	%	%
Uninsured	30.7	17.9	17.8
Place for usual source of care			
Doctor's office	58.2	71.0	67.6
Clinic/health center	37.5	26.3	29.7
ER/Other	4.4	2.1	2.6
Delay getting prescription in past year	17.4	12.7	8.3
Delay medical care in past year	22.7	22.0	13.1

Notes: Data are from the 2009 California Health Interview Survey and are weighted.

Percentages may not total 100% due to rounding.

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